CLAIMS ONLY

Handwritten: 1/21/04 2/3/04

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1		—				51						
2		1	1				52						
3		1		1			53						
4		1	1				54						
5		1		1			55						
6		1		1			56						
7		1		1			57						
8	1		—				58						
9		1	1				59						
10		1	1				60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
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22							72						
23							73						
24							74						
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33							83						
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37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	2		4				Total Indep						
Total Depend	8		8				Total Depend						
Total Claims	10		8				Total Claims						

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 228894

FILING DATE 09/228894

APPLICANT(S)

5/3/99 8/21/02 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51						
2		1		1		1	52						
3		1		1		1	53						
4		1		1		1	54						
5		1		1		1	55						
6		1		1		1	56						
7		1		1		1	57						
8					1		58						
9						1	59						
10						1	60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67.						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1		1		2		TOTAL IND.						
TOTAL DEP.	6		6		8		TOTAL DEP.						
TOTAL CLAIMS	7		7		10		TOTAL CLAIMS						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS